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CONFIRMATION NO. 2153

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| SERIAL NUMBER 10/780,650 | FILING OR 371(c) DATE 02/19/2004 RULE | CLASS 435 | GROUP ART UNIT 1645 | ATTORNEY DOCKET NO. MONT-038/03 |
| APPLICANTS Robert Bargatze, Bozeman, MT; John Jutila, Bozeman, MT; Jim Cutler, New Orleans, LA; Yongmoon Han, Bozeman, MT; Barry Pyle, Belgrade, MT; | | | | |
| ** CONTINUING DATA ***** This application is a CON of 09/068,935 11/23/1998 ABN which is a 371 of PCT/US96/18796 11/21/1996 which claims benefit of 60/007,477 11/22/1995 and is a CIP of 08/483,558 06/07/1995 PAT 5,578,309 which is a CIP of 08/247,972 05/23/1994 ABN | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/04/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> Allowance | STATE OR COUNTRY MT | SHEETS DRAWING 5 | TOTAL CLAIMS 26 | INDEPENDENT CLAIMS 1 |
| ADDRESS 58249 | | | | |
| TITLE Identification of pathogen-ligand interactions | | | | |
| FILING FEE RECEIVED 504 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |